

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			3/10/00
O.I.P.E. CLASSIFIER			5/9/00
FORMALITY REVIEW		60125	5/9/00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	1/12/00
2	✓	✓	2/24/00
3	✓	✓	4/19/00
4	✓	✓	
5	✓	✓	
6	✓	✓	
7	✓	✓	
8	✓	✓	
9	✓	✓	
10	✓	✓	
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12	✓	✓	
13	✓	✓	
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42	✓	✓	
43	✓	✓	
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46	✓	✓	
47	✓	✓	
48	✓	✓	
49	✓	✓	
50	✓	✓	

Claim	Final	Original	Date
51	✓	✓	2/10/00
52	✓	✓	3/5/00
53	✓	✓	8/1/00
54	✓	✓	
55	✓	✓	
56	✓	✓	
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97	✓	✓	
98	✓	✓	
99	✓	✓	
100	✓	✓	

Claim	Final	Original	Date
101	✓	✓	2/10/00
102	✓	✓	3/5/00
103	✓	✓	8/1/00
104	✓	✓	
105	✓	✓	
106	✓	✓	
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142	✓	✓	
143	✓	✓	
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146	✓	✓	
147	✓	✓	
148	✓	✓	
149	✓	✓	
150	✓	✓	

If more than 150 claims or 10 actions
staple additional sheet here

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